



10-21-02

1742

Please type a plus sign (+) inside this box → ☐

PTO/SB/21 (6-98)  
Approved for use through 09/30/2000. OMB 0651-0031  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	09/784,233
	Filing Date	February 14, 2001
	First Named Inventor	Shozo Nagano
	Group Art Unit	1742
	Examiner Name	S. Ip
Total Number of Pages in This Submission	Attorney Docket Number 30-5000(4015)DIV2	

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input checked="" type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): Return receipt postcard Marked-Up Version of Amendments
Remarks		

RECEIVED

OCT 24 2002  
1700 MAIL ROOM

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Jennifer J. Taylor, Reg. No. 48,711; Wells St. John P.S.
Signature	<i>Jennifer J. Taylor</i>
Date	October 18, 2002

CERTIFICATE OF MAILING		
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: <input type="text"/>		
Typed or printed name	EV182660929	
Signature		Date

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

O.I.P.E.  
OCT 18 2002  
PATENT & TRADEMARK OFFICE

PTO/SB/17 (11-01)  
Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2002</h2> <p style="font-size: small; margin: 0;">Patent fees are subject to annual revision.</p>		<b>Complete if Known</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number <b>09/784,233</b>	
		Filing Date <b>February 14, 2001</b>	
		First Named Inventor <b>Shozo Nagano</b>	
		Examiner Name <b>S. Ip</b>	
		Group Art Unit <b>1742</b>	
TOTAL AMOUNT OF PAYMENT (\$) <b>194.00</b>		Attorney Docket No. <b>30-5000(4015)DIV2</b>	

**METHOD OF PAYMENT** (check all that apply)

☒ Check  
 ☐ Credit card  
 ☐ Money Order  
 ☐ Other  
 ☐ None

☐ Deposit Account:  
 Deposit Account Number **23-0925**  
 Deposit Account Name **Wells St. John P.S.**

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below  
 ☒ Credit any overpayments  
☐ Charge any additional fee(s) during the pendency of this application  
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION					
1. BASIC FILING FEE					
Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
101	740	201	370	Utility filing fee	
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	
SUBTOTAL (1)					(\$) 0.00

**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

Total Claims	<b>23</b>	-20** =	<b>-3</b>	X	<b>Fee from below</b>	=	<b>0</b>
Independent Claims	<b>8</b>	-3** =	<b>1</b>	X	<b>Fee from below</b>	=	<b>84</b>
Multiple Dependent							

Large Entity				Small Entity				Fee Description	Fee Paid
Fee Code (\$)		Fee Code (\$)		Fee Code (\$)		Fee Code (\$)			
103	18	203	9	Claims in excess of 20					
102	84	202	42	Independent claims in excess of 3					
104	280	204	140	Multiple dependent claim, if not paid					
109	84	209	42	** Reissue independent claims over original patent					
110	18	210	9	** Reissue claims in excess of 20 and over original patent					
<b>SUBTOTAL (2)</b>								<b>(\$) 84.00</b>	

\*\*or number previously paid, if greater; For Reissues, see above

**FEE CALCULATION (continued)**

3. ADDITIONAL FEES						Fee Paid
Large Entity		Small Entity		Fee Description		
Fee Code	Fee (\$)	Fee Code	Fee (\$)			
105	130	205	65	Surcharge - late filing fee or oath		
127	50	227	25	Surcharge - late provisional filing fee or cover sheet		
139	130	139	130	Non-English specification		
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination		
112	920*	112	920*	Requesting publication of SIR prior to Examiner action		
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action		
115	110	215	55	Extension for reply within first month		110
116	400	216	200	Extension for reply within second month		
117	920	217	460	Extension for reply within third month		
118	1,440	218	720	Extension for reply within fourth month		
128	1,960	228	980	Extension for reply within fifth month		
119	320	219	160	Notice of Appeal		
120	320	220	160	Filing a brief in support of an appeal		
121	280	221	140	Request for oral hearing		
138	1,510	138	1,510	Petition to institute a public use proceeding		
140	110	240	55	Petition to revive - unavoidable		
141	1,280	241	640	Petition to revive - unintentional		
142	1,280	242	640	Utility issue fee (or reissue)		
143	460	243	230	Design issue fee		
144	620	244	310	Plant issue fee		
122	130	122	130	Petitions to the Commissioner		
123	50	123	50	Processing fee under 37 CFR 1.17(q)		
126	180	126	180	Submission of Information Disclosure Stmt		
581	40	581	40	Recording each patent assignment per property (times number of properties)		
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))		
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))		
179	740	279	370	Request for Continued Examination (RCE)		
169	900	169	900	Request for expedited examination of a design application		
Other fee (specify) _____						
<b>SUBTOTAL (3)</b>						<b>(\$) 110.00</b>

<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>	
Name (Print/Type)	<b>Jennifer J. Taylor, Ph.D.</b>	Registration No. (Attorney/Agent)	<b>48,711</b>
Signature	<i>Jennifer J. Taylor</i>	Telephone	<b>(509) 624-4276</b>
		Date	<b>10-18-2002</b>

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

EV182660929